

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

TRANSCRIPT ORDER FORM

Please use one form per court reporter per case, and contact court reporter
directly immediately after e-filing form. (Additional instructions on next page.)COURT USE ONLY
DUE DATE:

1a. Contact Person for this Order	Camie Linnell	2a. Contact Phone Number	702-521-5384	3a. Contact E-mail Address	clinnell@cslawoffice.net
1b. Attorney Name (if different)	David Z. Chesnoff	2b. Attorney Phone Number	702-384-5563	3b. Attorney E-mail Address	dzchesnoff@cslawoffice.net
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)		5. Name & Role of Party Represented Alexander Smirnov, Defendant			
Chesnoff & Schonfeld 520 S. 4th St Las Vegas, NV 89101		6. Case Name USA v. Smirnov			
		7a. District Court Case Number	2:24-cr-00091-ODW 2:24-cr-00702-ODW	7b. Appeals Court Case Number	

8. INDICATE WHETHER PROCEEDING WAS (choose only one per form):

DIGITALLY RECORDED

TRANSCRIBED BY A COURT REPORTER; NAME OF COURT REPORTER: _____

9. THIS TRANSCRIPT ORDER IS FOR: Appeal Non-Appeal | Criminal Civil | CJA USA FPD In forma pauperis (Court order for transcripts must be attached)

10. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested, format(s), and delivery type):

You MUST check the docket to see if the transcript has already been filed, and if so, provide the "Release of Transcript Restriction" date in column c, below.

a. HEARING(S) OR PORTIONS OF HEARINGS (Attach additional pages if necessary. If sealed, a court order releasing transcript to the ordering party must be attached here or emailed to transcripts_cacd@cacd.uscourts.gov.)

HEARING DATE	Minute Order Docket# (if available)	JUDGE (name)	PROCEEDING TYPE / PORTION If requesting less than full hearing, specify portion (e.g., witness or time). CJA orders: indicate if openings, closings, voir dire, or instructions requested.	b. SELECT FORMAT(S) (CM/ECF access included with purchase of transcript.)					c. RELEASE OF TRANS. RESTRICTION DATE (Provide release date of efiled transcript, or check to certify none yet on file.)	d. DELIVERY TYPE 30-day, 14-day, 7-day, 3-day, Daily, Hourly (Check with court reporter before choosing any delivery time sooner than "Ordinary-30.")		
				PDF (email)	TEXT / ASCII (email)	PAPER	CONDENSED (email)	CM/ECF ACCESS (web)			WORD INDEXING	
4/28/25		Wright	Bail Hearing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	DAILY (Next day) <input checked="" type="checkbox"/>
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	

11. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC. CJA Orders: Explain necessity of non-appeal orders, orders for transcripts of proceedings involving only a co-defendant, & special authorizations to be requested in Section 14 of CJA-24 Voucher (attach additional pages if needed).

12. ORDER & CERTIFICATION. By signing below, I certify that I will pay all charges (deposit plus additional), or, where applicable, promptly take all necessary steps to secure payment under the Criminal Justice Act.

Date 4/28/25

Signature /s/